



4191-02-U

SOCIAL SECURITY ADMINISTRATION

Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages requiring clearance by the Office of Management and Budget (OMB) in compliance with Public Law 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes one revision and one extension of OMB-approved information collections.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, email, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the following addresses or fax numbers.

(OMB)

Office of Management and Budget

Attn: Desk Officer for SSA

Fax: 202-395-6974

Email address: OIRA_Submission@omb.eop.gov

(SSA)

Social Security Administration, DCRDP

Attn: Reports Clearance Director

107 Altmeyer Building

6401 Security Blvd.

Baltimore, MD 21235

Fax: 410-966-2830

Email address: OPLM.RCO@ssa.gov

- I. The information collection below is pending at SSA. SSA will submit it to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than **[INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER]**. Individuals can obtain copies of the collection instrument by writing to the above email address.

Vocational Rehabilitation Provider Claim -- 20 CFR 404.2108(b),

404.2117(c)(1)&(2), 404.2101(a)&(b), 404.2121(a), 416.2208(b),

416.2217(c)(1)&(2), 416.2201(a)&(b), 416.2221(a), 34 CFR 361 -- 0960-0310.

State Vocational Rehabilitation (VR) agencies submit Form SSA-199 to SSA to obtain reimbursement of costs incurred for providing VR services. SSA requires state VR agencies to submit reimbursement claims for the following categories:

(1) claiming reimbursement for VR services provided; (2) certifying adherence to cost containment policies and procedures; and (3) preparing causality statements.

The respondents mail the paper copy of the SSA-199 to SSA for consideration and approval of the claim for reimbursement of cost incurred for SSA beneficiaries. For claims certifying adherence to cost containment policies and procedures, or for preparing causality statements, state VR agencies submit written requests as stipulated in SSA's regulations within the Code of Federal Regulations. In most cases, SSA requires adherence to cost containment policies and procedures as well as causality statements prior to determining whether to reimburse the state VR agencies.

SSA uses the information on the SSA-199, along with the written documentation, to determine whether or not, and how much, to pay the state VR agencies under SSA's VR program. Respondents are state VR agencies who offer vocational and employment services to Social Security and Supplemental Security Income recipients.

Type of Request: Revision of an OMB-approved information collection.

Collection Instrument	Number of Respondents	Frequency of Response	Number of Responses	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
a. Claiming Reimbursement on SSA-199 – 20 CFR 404.2108(b) & 416.2208(b)	80	160	12,800	23	4,907
b. Certifying Adherence to Cost Containment Policy and Procedures – 20 CFR	80	1	80	60	80

404.2117(c)(1) &(2), 416.2217(c)(1) &(2) & 34 CFR 361					
c. Preparing Causality Statements – 20 CFR 404.2121(a), 404.2101(a), 416.2201(a), & 416.2221(a)	80	2.5	200	100	333
Totals	80		13,080		5,320

- II.** SSA submitted the information collection below to OMB for clearance. Your comments regarding the information collection would be most useful if OMB and SSA receive them 30 days from the date of this publication. To be sure we consider your comments, we must receive them no later than **[INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER]**.

Individuals can obtain copies of the OMB clearance package by writing to OPLM.RCO@ssa.gov.

Integrated Registration Services (IRES) System -- 20 CFR 401.45 –

0960-0626. The IRES System verifies the identity of individuals, businesses, organizations, entities, and government agencies who use SSA's eService Internet and telephone applications. Individuals need this verification to electronically request and exchange business data with SSA. Requestors provide SSA the information needed to establish their identities. Once SSA verifies identity, the

IRES system issues the requestor a user identification number (User ID) and a password to conduct business with SSA. Respondents are employers and third party submitters of wage data, business entities providing taxpayer identification information, and data exchange partners conducting business in support of SSA programs.

Type of Request: Extension of an OMB-approved information collection.

Collection Instrument	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)
IRES Internet Registrations	724,581	1	5	60,382
IRES Internet Requestors	7,987,763	1	2	266,259
IRES CS (CSA) Registrations	25,221	1	11	4,624
Totals	8,737,565			331,265

Date: August 15, 2012

Faye Lipsky

Reports Clearance Director

Social Security Administration

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